

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

| | | | |
|-------------|--|-----------------|-------------------|
| Applicants: | Geoffrey Alan Cleary et al. | Case: | DIVA/304 |
| Serial No.: | 09/994,583 | Examiner: | unassigned |
| Filed: | 11/27/01 | Group Art Unit: | 2611 |
| Title: | SYSTEM AND METHOD FOR TIME SHIFTING THE DELIVERY OF VIDEO INFORMATION | | |

Commissioner for Patents
Washington, D.C. 20231

SIR:

PRELIMINARY AMENDMENT

Please preliminarily amend the above-identified patent application, as follows:

IN THE SPECIFICATION

Please replace paragraphs as follows:

09/20/2004 TDAWKINS 0000001 200702 00001507
Paragraph beginning on page 11, line 22 and ending on page 12, line 4:

01 FC:2202 72.00 20
02 FC:2201 42.00 01
Time-Shifted Content Introduction and Storage

Generally speaking, time shifted content comprises sufficient information to convey a program to a viewer at time different than its original broadcast time, and with the ability to interactively modify the presentation by, for example, skipping or streaming forward or backward in presentation time. In one embodiment, time-shifted content includes real time encoded play tracks, fast-forward tracks, and rewind tracks, as well as the Entry Point Data (EPD) files associated with each track. In one embodiment, each track is multiplexed at a transport rate of 3.6 Mbs for PAL content or 3.37 Mbs for NTSC. The play tracks include Dolby audio encoded at 192 Kbps. The fast forward and rewind tracks will not contain audio and will have a slightly higher video-encoding rate.

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temporarily adjusted content contemporaneously with said currently broadcast programs.

REMARKS

The applicants request that the Examiner enter this amendment prior to examining the application. By this amendment, applicants have amended the specification to correct minor typographical errors and have added new claims 2-28 to provide the applicants with the scope of protection to which they believe themselves entitled. The new claims are supported by the specification and drawings of the originally filed application and do not contain new matter.

If the Examiner believes that there are any issues that can be resolved by telephone, it is requested that the Examiner telephone Eamon J. Wall, Esq. at (732) 530-9404 so appropriate arrangements can be made for resolving such issues as expeditiously as possible.

Respectfully submitted,

p/8/02

EJ Wall

Eamon J. Wall, Attorney
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Please send all correspondence to:
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PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box →

Approved for use through 10/31/2002. OMB 0651-0031
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| | | |
|--|------------------------|---------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 08/984,583 |
| | Filing Date | 11/27/01 |
| | First Named Inventor | Cleary et al. |
| | Group Art Unit | 2811 |
| | Examiner Name | Not assigned |
| Total Number of Pages in This Submission | Attorney Docket Number | DIVA/304 |

| ENCLOSURES (check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response - Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | The Commissioner is authorized to charge the additional claims fee in the amount of \$114 to Applicants' attorneys' Deposit Account No. 20-0782. The Commissioner is authorized to charge any underpayment or credit any overpayment of fees (including but not limited to any extension fees pursuant to 1.136(e)), to Deposit Account 20-0782. A duplicate copy of this transmittal is attached. | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--------------------------------|
| Firm or Individual name | Eamon J. Wall, Reg. No. 39,414 |
| Signature | <i>E. J. Wall</i> |
| Date | 8/8/02 |

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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

09994583

CLAIMS AS FILED - PART I

| FOR | (Column 1) NUMBER FILED | (Column 2) NUMBER EXTRA |
|---|----------------------------|----------------------------|
| BASIC FEE (37 CFR 1.16(a)) | | |
| TOTAL CLAIMS (37 CFR 1.16(c)) | minus 20 = | . |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | minus 3 = | . |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | |

SMALL ENTITY

| RATE | FEE |
|--------------|----------|
| | \$ _____ |
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL | |

OR OTHER THAN SMALL ENTITY

| RATE | FEE |
|--------------|----------|
| | \$ _____ |
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

AMENDMENT A

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|--|-------|--|-----------------------------|
| Total (37 CFR 1.16(c)) | 28 | Minus | 20 | = 8 |
| Independent (37 CFR 1.16(b)) | 4 | Minus | 3 | = 1 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X \$ 9 = | 72 |
| X \$ 43 = | 43 |
| + \$ _____ = | |
| TOTAL ADD'L FEE | 115 |

OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

AMENDMENT B

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|--|-------|--|-----------------------------|
| Total (37 CFR 1.16(c)) | | Minus | ** | = |
| Independent (37 CFR 1.16(b)) | | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

AMENDMENT C

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|--|-------|--|-----------------------------|
| Total (37 CFR 1.16(c)) | | Minus | ** | = |
| Independent (37 CFR 1.16(b)) | | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.